PTO/SB/47 (09-06)

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For the following listed application(s), please recognize as the "Fee Address" under the provisions of 37 CFR 1.363 the address associated with: Customer Number: 27777	
OR The attached Request for Customer Number (PTO/SB/125) form.	
PATENT NUMBER (if known)	APPLICATION NUMBER
(manerity)	10/524,197
Completed by (check one):	
Applicant/Inventor	/Stephanie A. Barbosa/
Application ventor	Signature
Attorney or Agent of record 51,430	STEPHANIE A. BARBOSA
(Reg. No.)	Typed or printed name
Assignee of record of the entire interest. See 37 CFR	3.71. (215) 568-3100
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)	Requester's telephone number
Assignee recorded at Reel Frame	NOVEMBER 14, 2008
	Date
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more that one signature is required, see below*.	
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